

## EDITORIAL

# Matt R. Anderson and the Social Medicine Journal

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In homage and recognition of Matthew R. Anderson,  
*founder and driving force behind the Social Medicine Journal;*  
an exemplary professional of medicine and public health  
*in the service of humanity and the building of a better world.*

### The First Steps: A Fortunate Constellation of Extraordinary People

Matt Anderson is an exceptional person, and without a doubt, throughout his broad and diverse professional career, one of his greatest contributions was the creation of the *Social Medicine Journal*<sup>1</sup> and, through his personal commitment and drive, ensuring its continuity and consolidation—efforts to which he devoted himself with dedication and enthusiasm since the publication of Volume 1, Number 1, on February 25, 2006, nearly twenty years ago.

Restless since his youth, after finishing high school Matt spent seven years in Haiti, where he collaborated with movements opposing the dictatorial regime of the time. It was there that he came to understand the profound impact that injustice and social inequality have on life and

health—especially when people lack access to timely, quality healthcare services. In that context, he decided to become a physician, with the intention of returning to practice medicine in that country; however, the worsening of the Caribbean nation’s political situation made this impossible. Nevertheless, throughout his medical practice, he maintained his determination to help build a more equitable and just world for everyone—especially for the “wretched of the earth.”

Thus, after graduating in medicine from Harvard University in 1990, he completed his residency in family medicine at Montefiore Medical Center (hereinafter, Montefiore).<sup>2</sup> He returned in 1995 to that institution to join it permanently as a professional, becoming part of the Department of Family and Social Medicine at the Albert Einstein College of Medicine<sup>3, 4, 5</sup> (hereinafter, the Department), located in the Bronx, New York—



where Matt was born and raised. Matt considered himself a true New Yorker, and was deeply attached to the city.

From Montefiore and the Department, Matt actively promoted Social Medicine and trained specialists in community health. Among his projects, it is worth highlighting his collaboration with Guatemalan researchers committed to working with HIV-AIDS patients in that country<sup>6</sup> (among other works<sup>7,8,9,10</sup>), even managing to obtain medications that were not available there at the time—drugs that saved many lives and earned him the recognition and affection of countless people. His decision to work as a community physician in the Bronx reflected both his New Yorker pride and his commitment to the neighborhood, to the extent that he chose “brnxdoc” as the username in his email address—a clear sign of both professional and emotional identity.

For Matt, activism, medicine, and research were not separate or parallel paths, but rather intertwined expressions of a single commitment. In his teaching, he sought to awaken that same awareness in new generations of physicians, connecting students with international initiatives such as the “Luis Ángel García” Family Clinic in Guatemala. Matt saw that clinical training should always be accompanied by a critical understanding of the social structures that affect health—an approach that humanizes medical practice.

Matt was always compassionate, kind, and humble, combining personal warmth and cordiality with wide-ranging knowledge and a strong medical foundation. He also stood out as a writer and editor, a prolific researcher, and an excellent clinician—someone his patients, both in Guatemala and in the Bronx, trusted, appreciated, and respected. He was also highly literate in computing and spoke fluent French, Spanish, and Creole; later in life, he learned German. He placed all these talents in the service of the struggle for health as a human right and for social justice, including within his own country. Never were they a source of the slightest personal pretension.

In the Bronx, he worked in a methadone clinic, supported asylum seekers in their medico-legal processes, and actively participated in movements for health equity such as Physicians for a National Health Program (PNHP). He also maintained active ties with the People’s Health Movement (PHM)<sup>11</sup> and the Latin American Association of Social Medicine (ALAMES)<sup>12</sup>. His conviction and passion for health activism transcended borders and generations, even involving his eldest son, who accompanied him to many demonstrations and conventions.

At Montefiore and the Department, Matt met two other physicians—activists as deeply committed as he was to the struggle for health as a human right and for social justice: Lanny Smith (Clyde Lanford Smith) and Vic Sidel (Victor W. Sidel).. Together they joined interests, efforts, and responsibilities in various medical and social projects. Beyond their professional collaboration, they were bound by mutual admiration and sincere, supportive friendship. This fortunate convergence of exceptional individuals became the foundation for launching the *Social Medicine Journal*. To understand its origins, it is necessary to recall the paths of Lanny and Vic as well. The three of them, together and individually, fought for a better world, never using their activism or professional commitment as a means to seek personal recognition. Their shared story is essential, for it was this constellation—born out of the interwoven journeys of three people genuinely devoted to the struggle for health as a right—that made the conception and consolidation of the *Social Medicine Journal* possible.

**Lanny Smith.**<sup>13</sup> Lanny met Vic when he was very young—long before he met Matt. They connected through the American Medical Students Association (AMSA), which was formed in the 1970s after the American Medical Association (AMA) refused to support medical students who opposed the Vietnam War. Vic was deeply involved in AMSA’s formation, growth, and antiwar activities.

Lanny is a “white” internist whose first political act was to “escape” from the racist social structures that

characterized the southern United States while he was growing up in Georgia. Like Matt, he has spent his life combining clinical practice and medical research as an internist with the advancement of Social Medicine and his health activism.

As a young man, Lanny became involved with the Sandinista Revolution in Nicaragua, helping build houses while living with a farming family. From that experience—already socially awakened—he went on to study at the Medical College of Georgia (now part of the Georgia Health Sciences University), where he became active in the American Medical Students Association (AMSA), eventually serving as the organization’s International Health Chair.

He specialized in internal medicine, primary health care, and preventive medicine at Boston City Hospital. He also earned a Master’s in Public Health from the Harvard School of Public Health and a Diploma in Tropical Medicine and Hygiene from the London School of Hygiene and Tropical Medicine. He lived in El Salvador from 1992 to 1998 as director of *Médecins du Monde* (France), where he became fully bilingual in English and Spanish. From 2004 to 2012, he served on the Global Steering Committee of the People’s Health Movement (PHM), where he continues to act as an advisor and instructor at the International People’s Health University (IPHU)<sup>14</sup>. He was also the founder of Doctors for Global Health (DGH), an international network of physicians who promote health as a human right through a vision inspired by Paulo Freire—*Medicine of Liberation*—using health as a foundation for the pursuit of justice and dignity. He remains a member of its Board of Directors.

In El Salvador, he became involved with *Médicos Salvadoreños por la Responsabilidad Social* (Salvadoran Physicians for Social Responsibility, MESARES). There, he worked closely with communities affected by the war and collaborated with them in reconstruction efforts. He also engaged with the University of El Salvador, serving as a visiting professor of community and internal medicine, and led both Salvadoran and U.S. students to Morazán for community health training. Through Lanny and Doctors for Global Health

(DGH), Vic was invited to El Salvador, where he met with health promoters, students, and local communities. After his stay in El Salvador, Lanny traveled to Gambia and Uganda, where he taught and became familiar with rural African life; through him, DGH continues to work in Uganda.

In 2000, he joined Montefiore and the Department to work in Family and Social Medicine alongside Vic, who already had a long and distinguished career in that field. He lived in the Bronx until 2012. He now works at the Southern Jamaica Plain Health Center, affiliated with Brigham and Women’s Hospital in Boston, and serves as an Assistant Professor at Harvard University.

Lanny first met Matt through email. Matt, presumably at Vic’s suggestion—knowing that Lanny was in El Salvador—wrote to him from Guatemala, explaining that he was working there with HIV/AIDS patients. After that brief initial exchange online, they had a long phone conversation, and later, around 2000–2001, when both were back in the United States and living in the Bronx, they began collaborating in person on various projects at Montefiore and the Department, some of which also involved Vic.

**Victor W. Sidel** (who passed away in 2018)<sup>15</sup> was a highly respected and influential figure in the United States. He held two undergraduate degrees—one in Physics (Princeton University) and another in Medicine (Harvard University). Like Lanny, he was an internist and public health specialist, first working at Massachusetts General Hospital. In 1969, he was appointed Chair of what is now the Department of Family and Social Medicine, a position he held until his death.

An activist for the right to health and social justice, in 1961 he co-founded *Physicians for Social Responsibility*, becoming a pioneer and leading advocate of this perspective in the United States. Another of his lifelong commitments—perhaps reflecting the combination of his backgrounds in physics and medicine—was his opposition to war in general, and to nuclear war in particular. He participated actively in the organization *International Physicians for the Prevention of Nuclear War*. He was the author of several books

and trained many generations in Social Medicine, including Matt and Lanny, earning deep respect and affection from a wide range of colleagues who recognized his lifelong dedication to human rights and health. *Social Medicine* dedicated an issue to him, where his extensive career and contributions are documented.<sup>15</sup>

### Origin of the journal *Social Medicine*

At Montefiore and the Department, Matt, Lanny, and Vic came together—bound by friendship, mutual respect, and shared commitments to socially oriented medical education, health research, community-centered clinical practice, and health activism. This collaboration led them to co-author the article “*What is Social Medicine?*” However, when they submitted it for publication, several reviewers responded, “If you remove the references to Che Guevara and Cuba, we’ll gladly accept it.” In response, Lanny and Matt concluded: “*We need our own scientific journal—one of high quality, but one that can also include interviews with key leaders, social movements, political discourse, and advocacy for health as a human right, as well as articles that cannot find a place in other journals for political reasons.*”

Thus, after a series of additional steps, around 2004–2005 Matt, Lanny, and Vic met to sign the legal documents formalizing the *Social Medicine Journal* from Montefiore, thereby establishing the *Social Medicine Publishing Group*, which marked the beginning of its institutionalization. Although Vic was not directly involved in its launch or day-to-day development, his strong presence and extensive network of relationships gave the project the legitimacy and momentum it needed to take shape.

Given that one of the main objectives of Montefiore and the Department had always been their commitment to the 1978 *Declaration of Alma-Ata*—“Health for All”—and recognizing that this goal was shared by a broad international community of academics, physicians, and health activists, they also observed that this community was unfortunately divided by geography and language. Therefore, one of the journal’s central aims became to serve as a bridge—a vehicle through which this

community could exchange ideas and organize collectively.

Around 2004, they undertook the task of consolidating this project. Aware that since the 1970s Latin American Social Medicine had developed as a critical current of thought in health with continental presence, they envisioned from the outset that the journal should be bilingual—English and Spanish—and that *ALAMES* should be involved in the effort. In this way, North American and international audiences could access the Latin American critical perspective on health, while readers in Latin America could become familiar with the social-medicine work being produced in the Global North, thereby breaking down linguistic barriers.

Additionally, as a parallel yet complementary initiative, Matt and Lanny also planned to create, together with *ALAMES*, what they called *The Social Medicine Portal*: an online platform, maintained and regularly updated by the *Social Medicine Publishing Group* and *ALAMES*, designed to promote this current of thought through new technologies. The site also provided both groups with space to highlight their respective identities and ongoing activities. The portal was developed and maintained by Matt until around 2020. As part of this shared commitment, the *ALAMES* website has for many years been hosted on the domain created and financed by Matt.<sup>16</sup>

To move forward with the creation of the journal and the portal, in late 2003 Matt reached out to Débora Tajer (an Argentine professor and researcher who was then part of the general coordination of *ALAMES*), expressing his interest in fostering an active exchange between the *ALAMES* website and the *Social Medicine Portal*. Since the *ALAMES* website was managed by Fernando Borgia (a Uruguayan professor, researcher, and activist) as part of his responsibilities as Executive Secretary, Débora put him in contact with Matt.

Lanny, Débora, and Fernando had met and become friends a year earlier at the *First International Forum in Defense of the Health of the People* (Ier. Forum Internacional en Defensa de la Salud de los Pueblos)<sup>17</sup>, held in Porto Alegre, Brazil, in January

2002, within the framework of the *Second World Social Forum*. The event was jointly organized by ALAMES, the *People's Health Movement (PHM)*, and various other social organizations. The forum's declaration proclaimed "health as a right of humanity."

At Lanny's suggestion, Matt contacted the group, and soon an exchange of ideas and joint projects began between Matt, Lanny, and ALAMES, represented by Fernando. This collaboration led to a formal agreement between the *Social Medicine Portal* and the Association, finalized on June 18, 2004, shortly before the ALAMES Congress in Peru (August 2004), where the project was publicly presented.

At that Congress, Lanny and Fernando met with Claudio Schuftan and Víctor B. Penchaszadeh, who later joined the journal project, as well as Óscar Feo and Eugenio Vilar, who became close collaborators. Although Matt had been invited to the event, he was unable to attend, and he and Fernando did not meet in person until 2007, during the *10th ALAMES Congress* in Salvador da Bahia, Brazil. Later, in 2011, Lanny and Matt invited Fernando to serve as a visiting professor at the *International People's Health University (IPHU)* in New York. Interestingly, in 2012 the three met twice: first at the *Third People's Health Assembly* in Cape Town, and later in Montevideo, Uruguay, where Fernando served as General Coordinator of the *12th Latin American Congress of Social Medicine and Collective Health*, the *18th International Congress on Health Policy*, and the *6th Congress of the Americas Network of Local Health Actors*. Howard Waitzkin was also present at that event, which marked the final in-person meeting between Matt and Fernando.

In parallel, Matt sent ALAMES a draft outlining the first ideas for the journal, including, among others, that it should be bilingual (English–Spanish) and that it could be included as a publication within *BioMed Central*. In the effort to bring together a group of professionals of high standing and strong social commitment around the journal, they invited Claudio Schuftan and Víctor Penchaszadeh, both of whom had long careers as health activists. As with Matt, Lanny, and Vic, understanding the origins and early vision of the journal—which continues to this

day—requires recognizing the trajectories of Claudio and Víctor.

**Claudio Schuftan.**<sup>18</sup> Claudio and Matt first met virtually, discovering one another's writings and shared interests online, and from there maintained a close and ongoing correspondence, primarily through email. They met in person only twice: once in New York, when Claudio was there on personal matters, and again in 2013 in Cape Town, South Africa, during the *Third People's Health Assembly*, which was also attended by Óscar Feo and Fernando Borgia. In New York, they spoke at length and shared great enthusiasm for the idea of a bilingual journal on Social Medicine—the first and, at that time, the only one of its kind. By being bilingual, it would open up space for the work of Latin American Social Medicine to become known in the United States. During that conversation, Matt invited Claudio to serve as Associate Editor once the project took shape—an invitation he accepted and continues to fulfill to this day. It was Claudio who recommended Luis Justo as the first Spanish-language editor,<sup>19</sup> having met him at the *First People's Health Assembly* in 2000, in Bangladesh, where Luis's participation from a social-medicine perspective had greatly impressed him.

Claudio, a Chilean physician (University of Chile, 1970) specializing in pediatrics and nutrition (1973), continued his training in nutrition at the Massachusetts Institute of Technology (MIT) in Cambridge, USA. He went on to build an international career promoting social justice in nutrition, primary health care, and human rights across more than 50 countries. Between 1988 and 1995, he worked in Kenya, and since 1995 he has lived in Hanoi, Vietnam, where he continues his work as an international consultant while distributing the *Human Rights Reader*—a weekly, freely available electronic publication hosted on his website.<sup>20</sup>

Because of his extensive career advancing health equity, he was a founding member of the *People's Health Movement*, where he has served on the steering committee and as coordinator of its Global Right to Health Campaign. In addition, he has published widely on nutrition, primary health care, and health-related human rights. He currently serves as co-editor of the *Social Medicine Journal*.

**Víctor B. Penchaszadeh.** <sup>21</sup> A distinguished Argentine physician specializing in Public Health and Genetics, Víctor lived in New York as an exile between 1981 and 2006. He has been a strong advocate for health as a human right and for education in the medical sciences, as well as a pioneer in applying genetics in service of human rights. He co-developed the “grandparentage index” (*índice de abuelidad*) in collaboration with the *Madres de la Plaza de Mayo* and geneticist Mary-Claire King—a key tool for identifying children who were appropriated during the dictatorship.

A graduate in Medicine from the University of Buenos Aires (1964), he completed postgraduate studies in pediatrics at the same university, later specializing in human genetics and public health at Johns Hopkins University (Baltimore, Maryland), and in bioethics at Columbia University (New York, New York). As a political exile, he taught at the Central University of Venezuela and at Columbia University. He currently directs the *Specialization in Genetics, Human Rights, and Society* at the National University of Tres de Febrero in Buenos Aires.

Víctor first met Lanny in El Salvador, and they later reconnected at the Department, where Víctor also worked and where he met Matt and learned about the journal. Because of his professional background and bilingual fluency, he was invited to join its Editorial Board—a position he accepted. However, in the same year that the first issue was published (2006), he returned to Argentina. Initially, he stayed in contact with Lanny and Matt and reviewed several submissions, but over time, communication and collaboration with the journal gradually diminished.

**Luis Justo**, an Argentine pediatrician deeply committed to public health and to a conscious medical ethic that prioritizes the well-being of patients over the interests of the medical-industrial complex. He lived and worked in Patagonia, serving as a faculty member at the *National University of Comahue* in Neuquén, where he actively promoted bioethics—founding in 2010 the journal *Red Bioética*—and championed medical education and practice as vehicles for social justice and human

rights. He agreed to serve as the first editor of the Spanish-language edition of the *Social Medicine Journal*. However, due to heart problems, from which he later passed away on January 26, 2022, he served in this role only for the first issue, choosing not to continue in order to reduce his workload and responsibilities.

Without a doubt, the convergence of this constellation of brilliant and socially committed figures—each devoted to the struggle for social justice and the right to health—ensured both the continued vitality of the *Social Medicine Portal* and the publication of the *Social Medicine Journal*, providing Social Medicine with two essential platforms and a uniquely qualified team for its advancement.

### **The Beginnings of the *Social Medicine Journal***

In October 2005, the structure of the online journal was completed, <sup>22</sup> and beginning in November, regular weekly virtual meetings were held via Skype to ensure the project’s continuity. In January 2006, ideas began circulating about the journal’s logo, drawing from several designs created by Matt’s students. They ultimately chose “the green apple,” as Matt called it—a symbol of New York City—designed by Mónica Sánchez, from New Jersey but of Colombian origin. Mónica contributed greatly to the editorial project in its early stages and continues to collaborate with Lanny to this day.



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As a result of the weekly planning sessions, the first Editorial Committee was formed, composed of: Matthew R. Anderson, Fernando Borgia, Celia Iriart, <sup>23</sup> Luis Justo, Víctor B. Penchaszadeh, Claudio Schuftan, Clyde L. Smith, and Nancy L. Sohler.<sup>24</sup> Matt served as editor of the English edition, while Luis Justo was the editor of the Spanish edition.

According to Fernando Borgia, this process required immense patience, dedication, perseverance, and resources (most of which were provided by Matt): “We were, as people say now, creating a unicorn—but not a corporate one, rather a social unicorn, a creature of knowledge, without any pretense of financial return.”

An anecdote that captures the essence of the journal and the professionalism with which it was created concerns a text by Virchow that they wanted to include in the first issue. The available version was in English, but it was agreed that it should be translated instead from the original German. For this task, they enlisted the help of Cuban social physician Francisco Rojas Ochoa.<sup>†</sup> This example illustrates the degree of perfectionism that characterized the group of enthusiastic Social Medicine advocates from the very beginning—amateurs in editorial work, yet passionate about publishing a journal with a deep social commitment, without relying on the traditional funding streams from the medical–industrial complex. Virchow’s text remains a classic—still current and extraordinary today. One could almost replace “Upper Silesia” with Gaza, the Congo, or Somalia, and “typhus” with COVID-19, and it would continue to convey to today’s students the sociopolitical dimensions of health, the impact of war, and the often-invisible public health consequences of colonialism.

In the first issue of the *Social Medicine Journal* (2006),<sup>25</sup> the full text of Virchow’s “*Report on the Typhus Epidemic in Upper Silesia*” was published, along with the journal’s introductory statement (“The Editors”), Howard Waitzkin’s article “*A Century and a Half of Neglect and Rediscovery: Virchow’s Enduring Contributions to Social Medicine*,” and Vic Sidel’s (2006) piece “*Social Medicine at Montefiore: A Personal Perspective*.” At last—the editorial project had come to fruition.

### A Necessary Transition

As fate would have it, shortly after the publication of the first issue, Luis Justo’s health deteriorated, and he was forced to step down as editor of the Spanish edition. At that time (2006), Florencia Peña was part of the Promoting Group of ALAMES-

Mexico and was organizing a virtual group to facilitate the dissemination and national consolidation of the Association’s Mexico chapter. Yahoo Groups (a platform now defunct) offered the option of adding a URL to its portal. When she searched, she could not find an active website for ALAMES—neither in Mexico nor at the Latin American level—but during her search she came across the *Social Medicine Portal*. She wrote to Matt to request permission to include that URL in the virtual group’s page.

As a form of introduction, she attached to her email a text she had co-authored with Oliva López Arellano for the *Latin American Treatise on Sociology: “Health and Society: Contributions from Latin American Thought.”*<sup>26</sup> As a result, Matt not only granted permission to use the link but, after asking if she spoke English and receiving an affirmative answer, invited her to serve as editor of the Spanish edition. From that moment on, she has worked for the journal continuously, on an honorary basis, and today she serves as its principal editor.

Beginning with the planning of Issue No. 2, Matt and Florencia held weekly sessions to organize and follow up on the various activities required. For nearly fourteen years, they met every Sunday at eight o’clock in the morning (Mexico City time) via teleconference using Skype (also now defunct). These meetings took place consistently and without interruption, despite travel, sabbaticals, family commitments, and other responsibilities. Throughout the week, they also exchanged numerous emails. From the second issue onward, Israel Moreno Morales, Florencia’s research assistant, joined the editorial project, helping to format and upload the issues. Matt and Florencia did not meet in person until the 10th ALAMES Congress, held in Salvador Bahía, Brazil, in July 2007, introduced by Fernando Borgia. In the fourteen years they worked together, they saw each other in person only about half a dozen times—such are the quirks of virtual collaboration in the modern age.

Matt was an indefatigable editor. His solidarity was expressed through a commitment to help improve the manuscripts rather than simply reject them. He read every text, exchanged detailed suggestions

with the authors, followed up on their revisions, and corrected the English in the final versions for non-native speakers. For Florencia, collaborating with him was a continuous education and a constant reaffirmation of what it means to contribute to meaningful causes with sincerity and generosity—to work for the sake of the goal itself, without seeking prominence, power, or recognition.

In addition to his editorial work, Matt cared for his family, saw patients, conducted research on HIV/AIDS, traveled, wrote scientific articles, taught Social Medicine, managed the *Social Medicine Portal*, studied German, and much more—all infused with immense generosity and enthusiasm. The interaction of all these efforts made possible the journal's consolidation and continuity. Volume 1 contained three issues. From Volume 2 (2007) through Volume 6 (2012), four issues were published each year. However, given the size of the small editorial team—composed of Matt, Florencia, Israel, and the translators—by Volume 7 (2013) the publication schedule was reduced to three issues per year. Their many parallel commitments made it impossible for such a small group to sustain a quarterly production cycle.

Another transition for the *Social Medicine Journal* took place in 2024, when the Public Knowledge Project (PKP) launched the new version of its *Open Journal Systems* (OJS) platform. This presented a major challenge for the journal—one that was successfully undertaken and carried out by Israel, later joined by Isabel Rodríguez Ramos. The entire bilingual journal is now hosted on the new platform. Between 2023 and 2024, the Editorial Board was restructured. Each of its registered members was asked to confirm whether they were able and willing to continue actively participating—by promoting the journal, suggesting submissions, and serving as reviewers. Those who did not respond or chose to withdraw were removed. At the same time, new members were invited to join. Since 2024, the Editorial Board has been composed as follows:

**Editorial Leads:** Florencia Peña, Claudio Schuftan, Matthew R. Anderson (honorary)

**Associate Editors:** Oscar Feo Istúriz, Antonio Alberto Hernández-Reyes, Seiji Yamada, Howard Waitzkin

**Editorial Board:** Marcos Arana-Cedeño, Alexis

Benos, Fernando Borgia, Felipe C. Cabello, Ariel Frisancho, Alonso Gutiérrez Navarro, Laura Elena Ortega Elorza, Eugenio Villar Montesinos  
**Scientific Committee:** Gonzalo Basile, Claudia Chauhan, Martin Donohoe, Elias Kondilis, and Lanny Smith.

In 2024, the team also recognized the need to update the journal to meet new editorial standards for scholarly publications—ensuring that each article included a DOI, the ORCID of each author, and other required elements. The task was far from simple, but the team was extremely fortunate to have the guidance and collaboration of Isabel Rodríguez Ramos, editor of *Revista Pueblos y Fronteras Digital*<sup>27</sup>, who assisted in reviewing the journal, correcting metadata and other errors, and incorporating all the necessary official information. Throughout this process, they received the unwavering support of Miguel Anderson, Matt's younger son.

Today, the journal has been in publication for nineteen years. Matt was its mind and its heart for many of those years, and his direction and influence remain present in every issue. All of us involved in the project carry him within us still—with deep respect and affection.

We conclude by noting that, nineteen years after its first issue, *Social Medicine Journal* remains an open-access, bilingual publication (English–Spanish) that provides translation for authors at no cost. Paraphrasing what was stated in the editorial of its first issue<sup>28</sup>, which continues to hold true: we are aware that the main academic publications are controlled by institutions in the capitalist core, and that they are commercialized and exclusionary. For this reason, this journal strives to be as inclusive as possible, publishing works that may not be welcomed elsewhere due to their social-medicine, public health, critical, or political content.

The journal publishes work that is scientifically rigorous, intellectually honest, and free from commercial influence. It operates with a peer-review system designed to support authors in bringing their work to publication—offering recommendations rather than rejections. It promotes articles on activism and social

organization in support of social movements and organizations. The journal stands for peace and social justice, recognizes health as a fundamental human and social right, and advocates for the implementation of universal public health systems.

We conclude this text by noting that, nearly twenty years into its editorial life, *Social Medicine Journal* stands as the product of a collective of dreamers—many of them anonymous—who, at different times and from different corners of the world, found in Matt a rare combination of professionalism, commitment, and dedication. These, intertwined with his structural humanism, infused every step, every action, and every exchange that made the journal possible.

Without a doubt, Matt has illuminated us with his sincere friendship, his exceptional professionalism, and his vast knowledge. And although we know he dislikes tributes, awards, and public recognition—since his work has always been guided by a genuine commitment to advancing deeper causes—*Social Medicine Journal* owes him this small tribute for his crucial role in its creation and ongoing success.

Thank you, Matt, for everything.

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